

Exhibit 6

Payers' Rebates and Use of Rebates
(Defendants' Questions 11, 19-21, 24)

Defendants' Proposed Question/Request	Plaintiffs' Proposed Question/Request
<p>Question 11: In the form of the table below or through the production of documents, for each At-Issue Product, provide the total amount of money that You spent on the At-Issue Product for members enrolled in Your Health Plan for each year during the Time Period, the total Rebates received by You, and the total amount of Your members' out-of-pocket responsibility.</p>	<p>Question 11: In the form of the table below or through the production of documents, for each At-Issue Product, provide the total amount of money that You spent on the At-Issue Product for members enrolled in Your Health Plan for each year during the Time Period:</p>
<p>Question 19: In any contract identified in response to Question No. 18, did the PBM agree to share or pass through Rebates to You? _____ Yes _____ No</p> <p>If yes, in the form of the table below, identify each such contract, the percentage of or other determinant of the Rebates the PBM agreed to pass through to You, and the specific provision in the contract governing the pass through of such rebates:</p>	<p style="text-align: center;">No equivalent question</p>
<p>Question 20: In any contract identified in response to Question No. 18, did the PBM agree to pass Administrative Fees through to You? _____ Yes _____ No</p> <p>If yes, in the form of the table below, identify each such contract, the contracting entity, the year, the percentage of Administrative Fees the PBM agreed to pass through to You, and the specific provision in the contract governing the pass through of such fees:</p>	<p style="text-align: center;">No equivalent question</p>

<p>Question 21: In any contract identified in response to Question No. 18, did the PBM offer a guaranteed minimum payment to You, including any Rebate guarantee? ___Yes ___No</p> <p>If yes, in the form of the table below, identify each such contract, the guaranteed minimum payment, and the specific provision in the contract governing the guaranteed minimum payment:</p>	<p>No equivalent question</p>
<p>Question 24: Other than passing Rebates through to Your members at the point of sale, describe the ways in which You use Rebates and Administrative Fees received from PBMs for At-Issue Products:</p>	<p>No equivalent question</p>

Direct Purchasing
(Defendants' Question 40)

Defendants' Proposed Question/Request	Plaintiffs' Proposed Question/Request
<p>Question 40: Have You purchased At-Issue Products directly from pharmaceutical manufacturers, wholesalers, mail order pharmacies, and/or retail sellers? ____ Yes ____ No</p> <p>If yes, in the table below, identify each At-Issue Product You allege You purchased directly, the specific years You made the direct purchase, the entity that directly distributed the At-Issue Product(s) to You, the total quantity of At-Issue Products You purchased, and the total amount You paid:</p>	<p style="text-align: center;">No equivalent question</p>

Payers' Formularies and Drug Coverage
(Defendants' Questions 14, 15)

Defendants' Proposed Question/Request	Plaintiffs' Proposed Question/Request
<p>Question 14: In the form of the table below, list all PBMs or other entities with whom You have contracted for every Health Plan identified in response to Question No. 12 and for each plan year during the Time Period, identify which formulary that Health Plan offered for Prescription Drug Coverage and the PBM or other entity that administered the Prescription Drug Coverage.</p>	<p>Question 13: In the table below, list all PBMs or other entities with whom You have contracted for every Health Plan identified in response to Question No. 12 and for each plan year during the Time Period, identify the PBM or other entity that administered the Prescription Drug Coverage:</p>
<p>Question 15: In the form of the table below, for every Health Plan identified in response to Question No. 12 and for each plan year during the Time Period, identify whether each pharmaceutical was included or excluded on any formulary You used during the Time Period. If a pharmaceutical was included on a formulary, identify the relevant PBM (if any), the pharmaceutical's formulary tier or status, whether the pharmaceutical was the lowest branded copay on the formulary, and the years that the pharmaceutical was included on the formulary.</p>	<p style="text-align: center;">No equivalent question</p>

Alleged Misrepresentations, Omissions, and Reliance
(Defendants' Questions 27, 28; Defendants' Request 6)

Defendants' Proposed Question/Request	Plaintiffs' Proposed Question/Request
<p>Question 27: In the form of the table below, identify every specific misrepresentation that a Defendant allegedly made that forms the basis of the allegations in Your lawsuit, including the approximate date, the source, who received the statement, the reason why You believe the statement was false, whether or not You relied on the statement, and if so, how, and the Defendant(s) that made the statement:</p>	<p style="text-align: center;">No equivalent question</p>
<p>Question 28: In the form of the table below, describe any omissions that a Defendant allegedly made that forms the basis of the allegations in Your lawsuit, including the approximate date, any statement to which the omission relates, the reason why You believe a Defendant should have disclosed the omission, and the Defendant(s) that made the omission:</p>	<p style="text-align: center;">No equivalent question</p>
<p>Request 6: Documents related to other insulin pricing lawsuits or investigations, the relationship between WACs and Rebates, the fact that pharmaceutical manufacturers pay Rebates to PBMs in connection with formulary placements, drug pricing reform, and the manner in which you first became aware of the allegations in these actions. Documents received by You that related to representations made by PBMs about their services or made by pharmaceutical manufacturers about their list prices.</p>	<p>Request 5: Documents received by You that related to representations made by PBMs about their services or made by pharmaceutical manufacturers about their list prices.</p>

PBM Selection

(Defendants' Questions 25, 26; Defendants' Requests 2, 3)

Defendants' Proposed Question/Request	Plaintiffs' Proposed Question/Request
<p>Question 25: In any contract identified in response to Question No. 18, did any other PBM or any other contracting entity submit bids/proposals? ____ Yes ____ No</p> <p>If yes, identify any entity submitting competing bids/proposals, and produce the competing bids.</p>	<p>No equivalent question</p>
<p>Question 26: During the relevant time period, did you contract with, or use master contracts from, any other entities (e.g. MMCAP) for rebates or other price concessions related to purchasing pharmaceutical products? ____ Yes ____ No</p> <p>If yes, in the form of the table below, identify each such contract, the contracting entity, the year, and the percentage of or other determinant of the Rebates the contracting entity agreed to pass through to You:</p>	<p>No equivalent question</p>
<p>Request 2: Documents, including internal summaries, analyses, and presentations, reflecting Your reasons for selecting or not selecting a PBM prescription drug benefit plan for each year, including bids, communications, RFPs, procurement rules, guidance documents, and related documents, and documents relating to negotiation for Rebates for Your employee plan(s) or for Medicaid.</p>	<p>No equivalent request</p>

Request 3: Each contract, including **drafts**, amendments, riders, schedules, supplements, or other addenda that You entered into with a PBM, **health insurer, third-party administrator, or any other entity through which you obtained price concessions during the Time Period (e.g. MMCAP)**, or that otherwise was in effect during the Time Period.

Request 2: Each contract, including amendments, riders, schedules, supplements, or other addenda that You entered into with a PBM that otherwise was in effect during the Time Period

Statute of Limitations

(Defendants' Questions 30, 34, 42; Defendants' Request 6)

Defendants' Proposed Question/Request	Plaintiffs' Proposed Question/Request
Question 30: Identify when and how You first learned or discovered that pharmaceutical manufacturers pay Rebates to PBMs for the At-Issue Products.	No equivalent question
Question 34: Identify when and how You learned of or discovered any state, or federal investigation related to insulin pricing.	No equivalent question
Question 42: For each Defendant identified in Question No. 4, identify to the best of Your knowledge the date when You allege that You were first injured as a result of that particular Defendant's alleged conduct. This request is not designed to require an expert evaluation.	No equivalent question
Request 6: Documents related to other insulin pricing lawsuits or investigations, the relationship between WACs and Rebates, the fact that pharmaceutical manufacturers pay Rebates to PBMs in connection with formulary placements, drug pricing reform, and the manner in which you first became aware of the allegations in these actions. Documents received by You that related to representations made by PBMs about their services or made by pharmaceutical manufacturers about their list prices.	Request 5: Documents received by You that related to representations made by PBMs about their services or made by pharmaceutical manufacturers about their list prices.

Damages

(Defendants' Questions 41, 43)

Defendants' Proposed Question/Request	Plaintiffs' Proposed Question/Request
Question 41: For each Defendant identified in Question No. 4, state how You claim You have been damaged by that Defendant's alleged conduct. This request is not designed to require an expert evaluation.	No equivalent question
Question 43: Are You seeking any monetary damages? _____ Yes _____ No If yes, in the form of the table below, identify each category of damages or monetary relief that You allege, a dollar amount for the award You seek for each category of damages or monetary relief, and an explanation as to how You calculated that amount of damages:	Question 30: Are You seeking any monetary damages? _____ Yes _____ No If yes, summarize the categories of damages or monetary relief that You allege.

Members' Costs and Spending Decisions

(Defendants' Questions 11, 13, 17, 22-23; Defendants' Request 5)

Defendants' Proposed Question/Request	Plaintiffs' Proposed Question/Request
<p>Question 11: In the form of the table below or through the production of documents, for each At-Issue Product, provide the total amount of money that You spent on the At-Issue Product for members enrolled in Your Health Plan for each year during the Time Period, the total Rebates received by You, and the total amount of Your members' out-of-pocket responsibility.</p>	<p>Question 11: In the form of the table below or through the production of documents, for each At-Issue Product, provide the total amount of money that You spent on the At-Issue Product for members enrolled in Your Health Plan for each year during the Time Period:</p>
<p>Question 13: In the table below, for every Health Plan identified in response to Question No. 12 and for each plan year during the Time Period, identify (1) the annual deductible(s), including separate deductible amounts or requirements for use of in-network versus out-of-network pharmacies, and any separate deductible amounts or requirements on individual versus family expenditures, (2) the copayment or coinsurance rate for each pharmaceutical tier, (3) the annual Out-of-Pocket Maximums, including if there are different maximums based on in-network versus out-of-network pharmacy use, and/or based on family versus individual expenditures and whether Out-of-Pocket Maximums were based on pharmaceutical expenditures alone, or on combined pharmaceutical and medical expenditures, and (4) whether the Health Plan had first-dollar coverage for any At-Issue Product, in which the insured does not need to satisfy a deductible before the insurer assumes payment.</p>	<p>No equivalent question</p>
<p>Question 17: Did any Health Plan identified in response to Question No. 12 have benefit design features specifically pertaining to patients with diabetes or pre-diabetes? ___ Yes ___ No</p>	<p>No equivalent question</p>

<p>Question 22: Have You ever used preventative drug lists, critical drug affordability programs, or any other program to lower the out-of-pocket costs of the At-Issue Products for Your members? _____ Yes _____ No</p> <p>If yes, in the form of the table below, identify each such Health Plan where You implemented such a program, the program, the year the program was implemented, and the applicable At-Issue Products.</p>	<p>No equivalent question</p>
<p>Question 23: Have You ever passed Rebates received from a PBM through to Your members at the point of sale for any of the At-Issue Products? _____ Yes _____ No</p> <p>If yes, in the form of the table below, identify each such Health Plan where You passed on Rebates, the years You passed on Rebates, the At-Issue Products for which You passed on Rebates, and the percentage of Rebates that You passed on to members at the point of sale.</p>	<p>No equivalent question</p>
<p>Request 5: For each benefit year for which you are seeking relief, documents relating to your Health Plans, including documents sufficient to show: (1) the annual deductible(s), including separate deductible amounts or requirements for use of in-network versus out-of-network pharmacies, and any separate deductible amounts or requirements on individual versus family expenditures, (2) the copayment or coinsurance rate for each pharmaceutical tier, (3) the annual Out-of-Pocket Maximums, (4) the summary plan description, and (5) summaries of benefits and coverage associated with each of your Health Plans during the time period.</p>	<p>No equivalent request</p>

Payers' Audits

(Defendants' Question 38; Defendants' Request 7)

Defendants' Proposed Question/Request	Plaintiffs' Proposed Question/Request
<p>Question 38: Are Your Health Plan expenditures related to pharmaceuticals audited, either internally or by an external auditor? _____ Yes _____ No</p> <p>If yes, in the form of the table below, identify each audit and produce the audit.</p>	<p>Question 27: Did You or anyone acting on Your behalf conduct or participate in an audit or study, related to any services provided by the entities identified in Question No. 24. _____ Yes _____ No</p> <p>If yes, in the table below, identify each audit or study:</p>
<p>Request 7: Contracts with third-party advisors or auditors in effect during the Time Period that relate to prescription drug benefits, as well as any presentations, reports, analyses, or memoranda relating to prescription drug benefits Plaintiffs chose or did not choose.</p>	<p>Request 6: Contracts with third-party advisors in effect during the Time Period that relate to prescription drug benefits, as well as any presentations, reports, analyses, or memoranda relating to prescription drug benefits Plaintiffs chose or did not choose.</p>